



STANDARD COVERAGE and COST of DRUG BENEFIT FOR 2014

Benefit Stage	Coverage Range	Medicare / Plan Pays		Beneficiary Pays	
<u>Stage 1</u> Pre-Initial Coverage Annual Deductible	\$0 - \$310	0%	\$0	100%	\$310
<u>Stage 2</u> Initial Coverage	\$310 - \$2850	75%	\$2137.50	25%	\$712.50
<u>Stage 3</u> Post-Initial Coverage Coverage Gap	\$2850 - \$4550	52.5% - Brand Name 28% - Generic		47.5% - Brand Name 72% - Generic	
<u>Stage 4</u> Catastrophic Coverage	\$4550 and Up	95%	No Maximum	5% No Maximum	
LIS – Extra Help Full Benefit: Full Dual Eligible Medicare Medicaid		\$1.20 Generic \$3.60 Brand			
LIS – Extra Help Full Benefit: Not Dual Eligible		\$2.55 Generic \$6.35 Brand			